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G TRADE!	Application Number	llection of information unless it displays a valid OMB control number. 10/056,246			
TRANSMITTAL	Filing Date	01/24/2002			
FORM	First Named Inventor	Shelia Jean Burgess			
	Art Unit	2684			
(to be used for all correspondence after initial filing)	Examiner Name	Angelica Perez			
Total Number of Pages in This Submission	Attorney Docket Number	625269-012			

PTO/SB/21 (09-04)

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ENCLOSURES (Check all that apply)											
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	✓ F	ee Attach	ned		Licensin	ng-related Papers				al Communication to Board peals and Interferences	
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): 1. Postcard				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
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Printed	i name	Jam	es H. Beusse								
February 17, 2005				Reg. No.			27,115				
CERTIFICATE OF TRANSMISSION/MAILING											
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Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/056,246 TRANSM Filing Date 01/24/2002 For FY 2005 Shelia Jean Burgess First Named Inventor **Examiner Name Angelica Perez** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2684 (\$) 60.00 TOTAL AMOUNT OF PAYMENT 625269-012 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other (please identify): None Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 O 0 0 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) **Multiple Dependent Claims** - 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Petition for Extension of Time-1 month 60.00 SUBMITTED BY Registration No. 27,115 Signature Telephone 407-926-7701

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